

**State of Minnesota****District Court**

County \_\_\_\_\_

Judicial District: \_\_\_\_\_

Court File Number: \_\_\_\_\_

Case Type: \_\_\_\_\_ Juvenile

In Re Welfare of: \_\_\_\_\_

**Affidavit for Restitution  
Minn. Stat. §611A.04**

\_\_\_\_\_, states the following losses were incurred, or  
the following property was damaged, stolen or destroyed by \_\_\_\_\_  
\_\_\_\_\_, juvenile.

List the value and/or damage of each property item. Also include other out of pocket losses  
resulting from the crime. (Attach estimates or receipts. Attach another sheet if necessary.)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL:	\$ _____

My losses/damages (were) (were not) covered by insurance.

Name of insurance company \_\_\_\_\_

Amount of deductible and / or uninsured loss: \$ \_\_\_\_\_

Claim No. \_\_\_\_\_

☐ Insurance claim has been submitted but has not been paid.

I declare under penalty of perjury that everything I have stated in this document is true and  
correct. Minn. Stat. § 358.116.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

County and State Where Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**NOTE: This affidavit for restitution must be completed and returned to the court  
administrator not later than \_\_\_\_\_. Failure to claim restitution will  
not result in the loss of the right to pursue any other civil remedy available by law.**